SUPPORT

the Metal Museum's annual programming

YES! *I want to support the Metal Museum's exhibitions, education, and outreach:*

☐ One-time ☐ Monthly ☐ Quarterly ☐ Annual

gift of: ☐ $50 ☐ $100 ☐ $250 ☐ $500

☐ other: $_____

☐ This gift is in honor/memory of:

_____

☐ My company will match this gift.

METAL MUSEUM

Make your gift securely online at **metalmuseum.org/donation-form.**

Payment Information:

☐ My check for $_____ payable to the *Metal Museum* is enclosed.

☐ Please charge my credit card:

CARD #: _____ ZIP: _____

EXPIRATION: _____ CVV: _____

Contact Information

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____